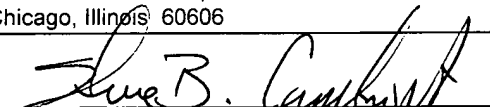
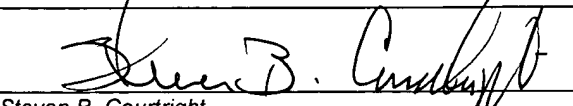
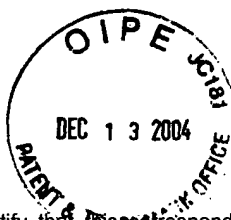
 <b>TRANSMITTAL FORM</b>	Attorney Docket No.	8060/498
	Application Number	10/783,387
	Filing Date	June 4, 2004
	First Named Inventor	Richard ZAGROBELNY
	Group Art Unit	2881
	Examiner	J. Smith

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Amendment / Response to Restriction/Election Req. After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Status Letter <input type="checkbox"/> Extension of Time Request (duplic) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement, PTO-1449, art <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawings: <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Applicant claims small entity status. <input type="checkbox"/> Request of Refund	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Post Card Receipt <input type="checkbox"/> Additional Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. <u>50-0930</u> . A duplicate copy of this sheet is enclosed.		

### CALCULATION OF FEE

				Small Entity		or	Large Entity	
	Claims After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add'l Fee
Total		Minus		0	x \$9=	0	x \$18=	
Indep.		Minus		0	x \$42=	0	x \$84=	
First Presentation of Multiple Dep. Claim					+\$140=	---	+\$280=	
					total add'l fee	\$ 0	total add'l fee	\$ 0

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name	Michael H. Baniak/Steven B. Courtright Registration No. 30,608/40,966 BANIAK PINE & GANNON 150 N. Wacker Drive, Suite 1200 Chicago, Illinois 60606		
Signature		Date:	December 8, 2004
CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450 on: <u>December 8, 2004</u>			
Signature		Date:	December 8, 2004



I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on December 8, 2004.

Michael H. Baniak / Steven B. Courtright  
Name of Applicants, Assignee, or Registered Representative

*Steven B. Courtright*  
Signature

December 8, 2004  
Date of Signature

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/783,387  
Applicant(s) : Richard Zagrobelny  
Filed : June 4, 2004  
TC/A.U. : 2881  
Examiner : J. Smith  
Docket No. : 8060/498  
Title : ULTRAVIOLET STERILIZATION  
DEVICE

Confirmation No. 6410

### AMENDMENT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

This is responsive to the Examiner's Action dated September 8, 2004. Please reconsider the rejection of the Claims in view of this Amendment and the following Remarks.